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| No. W 129354 | | Due no later than Sep 30, 2014 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form 1. Mailing Address: Correct in this box if needed. VAPOR CREEK, LLC DWAIN WADE 1107 S MAIN ST PAYETTE ID 83661 | | DWAIN WADE 508 S WHITLEY DR FRUITLAND ID 83619 | | | |
| | | | | 3. <u>New</u> Registered Agent Signature:* | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER | JENNIFER LYNN MOTT | 508 S. WHITLEY DR | FRUITLAND | ID | USA | 83619 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID W 129354 | | Signature: Dwain Wade | | | | Date: 07/18/2014 | |
| | | Name (type or print): Dwain Wade | | | | Title: Owner | |
| Processed 07/18/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | | |